MULTIPLE DEPENDENT CLAIM SERIAL NO. FILING DATE FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANT(S) CLAIMS AFTER AFTER AS FILED AFTER 1"AMENDMENT AS FILED AFTER 2 damendment 1ª AMENDMENT 2 ad AMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. DEP. IND. TOTAL IND. TOTAL IND. TOTAL DEP. TOTAL DEP. TOTAL CLAIMS TOTAL **CLAIMS** PTO - 1360 (REV. 11/04)

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